

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

First State PAC

ADDRESS (number and street)

P.O. Box 3006

☐ Check if different
than previously
reported. (ACC)

Wilmington

DE

19804

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00363648

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

08

01

2014

08

31

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Susan Frank Bullock

Signature of Treasurer

Susan Frank Bullock

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

09

19

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

First State PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
08		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
08		31		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2014</td></tr></table>	Y	Y	Y	Y	Y	2014						<table><tr><td colspan="5">32350.18</td></tr></table>	32350.18				
Y	Y	Y	Y	Y													
2014																	
32350.18																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">53989.96</td></tr></table>	53989.96															
53989.96																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">55471.16</td></tr></table>	55471.16					<table><tr><td colspan="5">248200.17</td></tr></table>	248200.17									
55471.16																	
248200.17																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">109461.12</td></tr></table>	109461.12					<table><tr><td colspan="5">280550.35</td></tr></table>	280550.35									
109461.12																	
280550.35																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">-2622.10</td></tr></table>	-2622.10					<table><tr><td colspan="5">168467.13</td></tr></table>	168467.13									
-2622.10																	
168467.13																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">112083.22</td></tr></table>	112083.22					<table><tr><td colspan="5">112083.22</td></tr></table>	112083.22									
112083.22																	
112083.22																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

First State PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
08 01 2014

To:

M M / D D / Y Y Y Y Y
08 31 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

14000.00

(ii) Unitemized

0.00

200.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

14200.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

48600.00

227100.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

48600.00

241300.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

6863.22

6863.22

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

7.94

36.95

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

55471.16

248200.17

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

55471.16

248200.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4877.90	110967.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4877.90	110967.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-7500.00	57500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	-2622.10	168467.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-2622.10	168467.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	48600.00	241300.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48600.00	241300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	4877.90	110967.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	6863.22	6863.22
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	-1985.32	104103.91

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. Mortgage Bankers Association PAC

Mailing Address 1919 M St NW
FI 5

City State Zip Code
Washington DC 20036-3572

FEC ID number of contributing
federal political committee.

C C00004812

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2014

Transaction ID : C20914621

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Abbvie Political Action Committee

Mailing Address 1 N. Wakegan Road

City State Zip Code
North Chicago IL 60064

FEC ID number of contributing
federal political committee.

C C00536573

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2014

Transaction ID : C20914632

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Google, Inc. NETPAC

Mailing Address 25 Massachusetts Ave NW
FI 9

City State Zip Code
Washington DC 20001-1430

FEC ID number of contributing
federal political committee.

C C00428623

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 02 / 2014

Transaction ID : C20916022

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

8000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. American Health Care Association PAC

Mailing Address 1201 L Street, NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00006080

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / **01** / **2014**

Transaction ID : C20914623

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. UnitedHealth Group Inc. PAC

Mailing Address 9900 Bren Road East

City State Zip Code
Hopkins MN 55343

FEC ID number of contributing
federal political committee.

C C00274431

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

08 / **29** / **2014**

Transaction ID : C20914633

Amount of Each Receipt this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Target Citizens Political Forum

Mailing Address 1000 Nicollet Mall
TPS 3275

City State Zip Code
Minneapolis MN 55403

FEC ID number of contributing
federal political committee.

C C00098061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / **02** / **2014**

Transaction ID : C20916023

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

13500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 14
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NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. National Cable & Telecommunications Association PAC

Mailing Address 25 Massachusetts Avenue, NW
Suite 100

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00010082

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / **01** / **2014**

Transaction ID : C20914624

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Merck & Company Employees PAC

Mailing Address 601 Pennsylvania Avenue, NW
North Building, Suite 1200

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00097485

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / **18** / **2014**

Transaction ID : C20914634

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Rock Tenn PAC

Mailing Address 504 Thrasher St

City State Zip Code
Norcross GA 30071-1967

FEC ID number of contributing
federal political committee.

C C00117424

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / **01** / **2014**

Transaction ID : C20914625

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. CSX Corporation Good Government Fund

Mailing Address 1331 Pennsylvania Avenue, NW
Suite 560

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00163832

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 18 / 2014

Transaction ID : C20914635

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Mimedx Group, Inc. PAC

Mailing Address 1775 W Oak Commons Ct

City State Zip Code
Marietta GA 30062-2254

FEC ID number of contributing
federal political committee.

C C00557298

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

08 / 02 / 2014

Transaction ID : C20916025

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Pacific Life Insurance Company PAC

Mailing Address 700 Newport Center Drive

City State Zip Code
Newport Beach CA 92660

FEC ID number of contributing
federal political committee.

C C00068528

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 18 / 2014

Transaction ID : C20914637

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. US Bancorp Political Participation Program

Mailing Address 950 F Street NW
Suite 750

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00018036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 18 / 2014

Transaction ID : C20914638

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. U.S. Travel Association PAC

Mailing Address 1100 New York Ave NW
Ste 450W

City State Zip Code
Washington DC 20005-3934

FEC ID number of contributing
federal political committee.

C C00457754

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 15 / 2014

Transaction ID : C20914629

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Ashland Inc. PAC for Employees

Mailing Address 50 East River Center Boulevard
PO Box 391

City State Zip Code
Covington KY 41011

FEC ID number of contributing
federal political committee.

C C00075994

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 18 / 2014

Transaction ID : C20914639

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

10000.00

TOTAL This Period (last page this line number only)..... ►

48600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. Coastal Properties, LLC (Bellmoor)

Mailing Address 6 Christian Street

City

Rehoboth Beach

State

DE

Zip Code

19971

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6863.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2014

Transaction ID : C20916026

Amount of Each Receipt this Period

6863.22

Refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6863.22

6863.22

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

First State PAC

A. Perkins Coie LLP



Mailing Address 700 13th Street, NW
Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement

Legal & Compliance Services

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : D601770

Amount of Each Disbursement this Period

B. Diamond Strategies

08 / 26 / 2014

Mailing Address 4633 Talley Hill Lane

City	State	Zip Code
Wilmington	DE	19803

Purpose of Disbursement Strategic Consulting Services

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Transaction ID : D601771

Amount of Each Disbursement this Period

750.00

C. Suntrust Bank

Mailing Address PO Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement	Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Transaction ID : D601766

Amount of Each Disbursement this Period

34.95

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2284.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

First State PAC

Full Name (Last, First, Middle Initial)

A. Hagan Forward NCMailing Address 600 Pennsylvania Ave SE
Ste 210

City Washington State DC Zip Code 20003-4344

Purpose of Disbursement
Void of 7/2014 Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2014

Transaction ID : D601980

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

B. Shaheen for Senate

Mailing Address 105 N State Street

City Concord State NH Zip Code 03301

Purpose of Disbursement
Void of 6/2014 Contribution

Candidate Name

Jeanne ShaheenOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2014

Transaction ID : D601981

Amount of Each Disbursement this Period

-2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-7500.00

-7500.00
